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**New Study Confirms Link Between Early Menopause and Higher Risk of Fracture**

*Data pulled from WHI clinical trials shows fracture risk for those with early menopause not minimized by use of calcium, vitamin D, or standard dose hormone therapy*

CLEVELAND, Ohio (November 2, 2016)—If you're in menopause before the age of 40, you have a higher fracture risk. That fact has already been proven by the Women's Health Initiative (WHI) clinical trials. Now a new study evaluating the same WHI data further concludes that, even with calcium and vitamin D supplements, your risk of fracture is still higher. The study is being published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

For years, calcium and vitamin D have been touted for their abilities to increase bone mineral density. Hormone therapy is also recognized for its ability to help ward off osteoporosis. That's what prompted this latest study to evaluate the effectiveness of calcium, vitamin D, and/or hormones in offsetting the higher fracture risks for women experiencing early menopause. Based on an evaluation of nearly 22,000 women included in the WHI trials, women aged younger than 40 years already in menopause had significantly higher risks for fracture than women who experienced menopause between the ages of 40 and 49 or after 50, *regardless* of treatment intervention.

Although the findings are disappointing for women experiencing an early onset of menopause, the study did open the door to a number of questions and possibilities. For example, women with early menopause are candidates for hormone therapy until at least the average age of menopause (52 years) to reduce the risks of heart disease, osteoporosis, and cognitive and mood changes. It is possible that earlier initiation of treatment for those with early menopause with calcium, vitamin D, or hormones; more appropriate dosing of young women, longer duration of treatment; or longer duration of follow-up could provide better bone protection and ultimately reduce fracture risk.

“This study highlights the need for healthcare providers to take into consideration a woman's age at menopause onset when evaluating patients for fracture risk,” says Dr. JoAnn Pinkerton, NAMS executive director. “Women at risk for bone loss need 1,200 mg of calcium per day, with adequate vitamin D, and encouraged to get as much as possible through diet due to concern that too much supplemental calcium may increase atherosclerotic plaque in women. Women with early menopause should discuss whether they are candidates for hormone therapy with their providers, appropriate amount of calcium, vitamin D and hormones.”

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Founded in 1989, The North American Menopause Society (NAMS) is North America's leading nonprofit organization dedicated to promoting the health and quality of life of all women during midlife and beyond through an understanding of menopause and healthy aging. Its multidisciplinary membership of 2,000 leaders in the field—including clinical and basic science experts from medicine, nursing, sociology, psychology, nutrition, anthropology, epidemiology, pharmacy, and education—makes NAMS uniquely qualified to serve as the definitive resource for health professionals and the public for accurate, unbiased information about menopause and healthy aging. To learn more about NAMS, visit [www.menopause.org](http://www.menopause.org).